Permittee Name: Water Works & Sewer Board of the City of Oxford

Facility Name: Oxford Tull C. Allen WWTP
Location: 2975 Silver Run Road

Oxford, AL 36203

County: Talladega

Permit No: AL0058408					
Monitoring Period					
From:	To:				
8/1/2022	8/31/2022				

Digitally signed by: AEPACS Date: 2022.09.20 08:44:13 -05:00 Reason: Copy Of Record Location: State of Alabama

#### Outfall: 001-1

Parameter		Quantity or Loading		Quantity or Loading		Units Quality or Concentration		Units	No. Ex.	Sample Freq	Sample Type
Turbidity (00070)	Sample Measurement	****	****	****	****	1.78	3.12	NTU	0	5X Weekly	Grab
EFFLUENT GROSS VALUE	Permit Requirement	****	****		****	REPORT Monthly Average	REPORT Maximum Daily		U	5X Weekly	Grab
Oxygen, Dissolved (DO) (00300)	Sample Measurement	****	****	****	7.44	****	****		0	3X Weekly test	Grab
EFFLUENT GROSS VALUE	Permit Requirement	****	****		6.0 Minimum Daily	****	****	mg/l	U	3X Weekly test	Grab
рН (00400)	Sample Measurement	****	****	****	7.61	****	7.72	S.U.	0	3X Weekly test	Grab
EFFLUENT GROSS VALUE	Permit Requirement	****	****	*****	6.0 Minimum Daily	****	9.0 Maximum Daily	<b>S.</b> U.	0	3X Weekly test	Grab
Solids, Total Suspended	Sample Measurement	173	296	lbs/day ·	****	6.6	9.7	- mg/l	0	3X Weekly test	24-Hr Composite
(00530) EFFLUENT GROSS VALUE	Permit Requirement	1125 Monthly Average	1688 Weekly Average		****	30.0 Monthly Average	45.0 Weekly Average		0	3X Weekly test	24-Hr Composite

	F PRINCIPAL EXECUTIVE
OFFICE	R OR AUTHORIZED AGENT

Max Gaskins

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE
Electronically Signed via AEPACS	(256) 405-6821	09/20/2022

Permittee Name: Water Works & Sewer Board of the City of Oxford

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Oxford, AL 36203

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**Outfall: 001-1** 

Permit No: AL0058408					
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<b>From:</b> 8/1/2022	<b>To:</b> 8/31/2022				

Parameter		Quantity (	or Loading	Units	Qual	lity or Concentr	ation	Units	No. Ex.	Sample Freq	Sample Type	
Solids, Total Suspended (00530)	Sample Measurement	6786	10539	lbs/day	****	257	418				3X Weekly test	24-Hr Composite
RAW SEW/INFLUENT	Permit Requirement	REPORT Monthly Average	REPORT Weekly Average	ios/day	****	REPORT Monthly Average	REPORT Weekly Average	mg/l	0	3X Weekly test	24-Hr Composite	
Nitrogen, Ammonia Total (As N) (00610)	Sample Measurement	1.63	5.71	lbs/day	****	0.07	0.24	mg/l	0	3X Weekly test	24-Hr Composite	
EFFLUENT GROSS VALUE	Permit Requirement	37.5 Monthly Average	56.2 Weekly Average	ios/day	****	1.0 Monthly Average	1.5 Weekly Average	mg/l	U	3X Weekly test	24-Hr Composite	
Nitrogen, Kjeldahl Total (As N) (00625)	Sample Measurement	43	43	lbs/day	****	1.8	1.8	ma/1		Monthly	24-Hr Composite	
EFFLUENT GROSS VALUE	Permit Requirement	REPORT Monthly Average	REPORT Weekly Average	los/day	****	REPORT Monthly Average	REPORT Weekly Average	mg/l	0	Monthly	24-Hr Composite	
Nitrite Plus Nitrate Total 1 Det.	Sample Measurement	110	110		****	4.6	4.6		0	Monthly	24-Hr Composite	
(As N) (00630) EFFLUENT GROSS VALUE	Permit Requirement	REPORT Monthly Average	REPORT Weekly Average	lbs/day	****	REPORT Monthly Average	REPORT Weekly Average	mg/l	0	Monthly	24-Hr Composite	

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Parameter		Quantity (	or Loading	Units	Qua	lity or Concentr	ation	Units	No. Ex.	Sample Freq	Sample Type
Phosphorus, Total (As P) (00665)	Sample Measurement	34	34	lbs/day	****	1.4	1.4	ma/1	0	Monthly	24-Hr Composite
EFFLUENT GROSS VALUE	Permit Requirement	REPORT Monthly Average	REPORT Weekly Average	ios/day	****	REPORT Monthly Average	REPORT Weekly Average	mg/l 0	O O	Monthly	24-Hr Composite
Silver Total Recoverable (01079)	Sample Measurement	****	****	***** *B *B		Monthly	Grab				
EFFLUENT GROSS VALUE	Permit Requirement	****	****		****	REPORT Monthly Average	REPORT Maximum Daily	ug/l	0	Monthly	Grab
Color (ADMI Units) (01290)	Sample Measurement	****	****	****	****	****	55	4 DV (I		5X Weekly	Grab
EFFLÜENT GROSS VALUE	Permit Requirement	****	****	*****	****	****	80 Maximum Daily	ADMI	0	5X Weekly	Grab
Flow, In Conduit or Thru	Sample Measurement	3.15	4.62	***** MGD	****	****	****	****	0	Daily	Continuous
Treatment Plant (50050) EFFLUENT GROSS VALUE	Permit Requirement	REPORT Monthly Average	REPORT Maximum Daily	MGD	****	****	****			Daily	Continuous

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I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

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**Outfall: 001-1** 

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Parameter		Quantity or Loading Unit		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Sample Freq	Sample Type
Chlorine, Total Residual (50060)	Sample Measurement	****	****	****	****	*9	*9	- mg/l 0		3X Weekly test	Grab	
EFFLUENT GROSS VALUE	Permit Requirement	****	****		****	0.066 Monthly Average	0.115 Maximum Daily		U	3X Weekly test	Grab	
E. Coli (51040)	Sample Measurement	****	****	****		**** 26 72			5X Weekly	Grab		
EFFLUENT GROSS VALUE	Permit Requirement	****	****		****	126 Monthly Average	298 Maximum Daily	col/100mL	0	5X Weekly	Grab	
Cyanide, Free Available	Sample Measurement	****	****	****	****	*B	*B	ug/l	0	Monthly	Grab	
(51173) EFFLUENT GROSS VALUE	Permit Requirement	****	****	*****	****	31.4 Monthly Average	70.5 Maximum Daily			Monthly	Grab	
Peracetic Acid (51674)	Sample Measurement	****	****	****	****	****	0.24	- mg/l	0	5X Weekly	Grab	
EFFLUENT GROSS VALUE	Permit Requirement	****	****		****	****	1.0 Maximum Daily			5X Weekly	Grab	

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Parameter		Quantity (	or Loading	Units	Qual	lity or Concentr	ation	Units	No. Ex.	Sample Freq	Sample Type				
BOD, Carbonaceous 05 Day, 20C (80082)	Sample Measurement	102	111	lbs/day	****	3.9	4.3		0	3X Weekly test	24-Hr Composite				
EFFLUENT GROSS VALUE	Permit Requirement	300 Monthly Average	450 Weekly Average	ios/day	****	8.0 Monthly Average	12.0 Weekly Average	mg/l	U	3X Weekly test	24-Hr Composite				
BOD, Carbonaceous 05 Day,	Sample Measurement	2283	2714	11 / 1	****	85	100	- mg/l						3X Weekly test	24-Hr Composite
20C (80082) RAW SEW/INFLUENT	Permit Requirement	REPORT Monthly Average	REPORT Weekly Average	lbs/day	****	REPORT Monthly Average	REPORT Weekly Average		0	3X Weekly test	24-Hr Composite				
BOD, Carb-5 Day, 20 Deg C,	Sample Measurement	****	****	****	95	****	****	%	0	Monthly	Calculated				
Percent Remvl (80091) Percent Removal	Permit Requirement	****	****	*****	85.0 Monthly Average Minimum	****	****			Monthly	Calculated				
Solids, Suspended Percent	Sample Measurement	****	****	****	97	****	****	0/	0	Monthly	Calculated				
Removal (81011) Percent Removal	Permit Requirement	****	****	49.49.49.49	85.0 Monthly Average Minimum	****	****	%		Monthly	Calculated				

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#### Outfall: 001-T

Parameter		Quantity of	or Loading	Units	Qual	ity or Concentr	ation	Units	No. Ex.	Sample Freq	Sample Type			
Toxicity, Ceriodaphnia Chronic	Sample Measurement	****	0		mass=0.fail=1	mass=0.fsi1=1	****	****	****	****			Annually	24-Hr Composite
(61426) EFFLUENT GROSS VALUE	Permit Requirement	****	0 Single Sample	pass=0;fail=1	****	****	****	****	U	See Permit Requirements	24-Hr Composite			
Toxicity, Pimephales Chronic (61428)	Sample Measurement	****	0	- nass=0:fail=1	pass=0;fail=1	****	****	0	Annually	24-Hr Composite				
EFFLUENT GROSS VALUE	Permit Requirement	****	0 Single Sample	pass=0,1411=1	****	****	****	****	J	See Permit Requirements	24-Hr Composite			

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END OF REPORT

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**Submission Identifier:** DMR-AL0058408-20220831-1

**Submission Signature Hash:** JJeroZehxplw6zvPtC+Vhx5R/TysXwHWsWD4H4Znjcs=

**Submitter Name:** Max Gaskins

**Submitter Email:** mgaskins@oxfordwater.com

**Submitted Date/Time:** 9/20/2022 8:44:12 AM